

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**
FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

0 1 — 0 0 7

2. STATE:

Nebraska

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACT (MEDICAID)

4. PROPOSED EFFECTIVE DATE

June 1999

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

Section 4724 of the BBA of 1997

7. FEDERAL BUDGET IMPACT:

a. FFY 2001 \$

b. FFY 2002 \$

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

36a (New Page) MS-01-07

41 (Revised Page) MS-01-07

77 (Revised Page) MS-01-07

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):

41 (Old) MS-91-30

77 (Old) MS-79-06

10. SUBJECT OF AMENDMENT:

Title XIX of the Social Security Act, Elimination of Waste, Fraud and Abuse

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL☒ OTHER, AS SPECIFIED:

Governor has waived review.

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

Robert J. Seiffert

14. TITLE:

Medicaid Administrator

15. DATE SUBMITTED:

June 20, 2001

16. RETURN TO:

HHS Finance and Support

Medicaid Division

P.O. Box 95026

Attn: Margaret Booth

Lincoln, Nebraska 68509-5026

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

June 25, 2001

18. DATE APPROVED:

JUL 05 2001

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

06/01/99

20. SIGNATURE OF REGIONAL OFFICIAL:

[Signature]

21. TYPED NAME:

Thomas H. Benz

22. TITLE:

ARA for Medicaid & State Operations - INT. SS

New: HCFA-PM-99-3 (CMSO)
JUNE 1999

State: Nebraska

Citation 4.5a Medicaid Agency Fraud Detection and Investigation

Section 1902(a)(64) of
the Social Security Act
P.L. 105-33

The Medicaid agency has established a mechanism to
receive reports from beneficiaries and others and compile
data concerning alleged instances of waste, fraud, and
abuse relating to the operation of this title.

TN No. MS-01-07

Supersedes Approval Date JUL 05 2001 Effective Date 06/01/99

TN No. NA

Revision: HCFA-PM-99-3
JUNE 1999

(CMSO)

State: Nebraska

Citation	4.10 Free Choice of Providers
42 CFR431.51	
AT-78-90	(a) Except as provided in paragraph (b), the Medicaid agency assures that an individual eligible under the plan may obtain Medicaid services from any institution, agency, pharmacy, person, or organization that is qualified to perform the services, including of the Act an organization that provides these services or arranges for their availability on a prepayment basis.
46 FR 48524	
48 FR23212	
1902 (a) (23)	
P.L. 100-93	
(section 8(f))	
P.L. 100-203	
(Section 4113)	(b) Paragraph (a) does not apply to services furnished to an individual--
	(1) Under an exception allowed under 42 CFR 431.54, subject to the limitations in paragraph (c), or
	(2) Under a waiver approved under 42 CFR 431.55, subject to the limitations in paragraph (c), or
	(3) By an individual or entity excluded from participation in accordance with section 1902(p) of the Act, or
Section 1902(a)(23) of the Social Security Act	(4) By individuals or entities who have been convicted of a felony under Federal or State law and for which the State determines that the offense is inconsistent with the best interests of the individual eligible to obtain Medicaid services.
P.L. 105-33	
	(c) Enrollment of an individual eligible for medical assistance in a primary care case management system described in section 1915(b)(1), a health maintenance organization, or a similar entity shall not restrict the choice of the qualified person from whom the individual may receive emergency services or services under section 1905(a)(4)(c).

TN No. MS-01-07

Supersedes Approval Date JUL 05 2001 Effective Date 06/01/99

TN No. MS-91-30

Revision: HCFA-PM-99-3 (CMSO)
JUNE 1999

State: Nebraska

Citation

1902(a)(4)(C) of the
Social Security Act
P.L. 105-33

4.29 Conflict of Interest Provisions

The Medicaid agency meets the requirements of section 1902(a)(4)(C) of the Act concerning the prohibition against acts, with respect to any activity under the plan, that is prohibited by section 207 or 208 of title 18, United States Code.

1902(a)(4)(D) of the
Social Security Act
P.L. 105-33

The Medicaid agency meets the requirements of section 1902(a)(4)(D) of the Act concerning the safeguards against conflicts of interest that are at least as stringent as the safeguards that apply under section 27 of the Office of Federal Procurement Policy Act (41 U.S.C. 423).

TN No. MS-01-07

Supersedes Approval Date JUL 05 2001 Effective Date 06/01/99

TN No. MS-79-06